

**CITY OF MURRAY, KENTUCKY  
APPLICATION FOR EMPLOYMENT**



**DATE:**\_\_\_\_\_

(PLEASE PRINT PLAINLY WHEN FILLING OUT THE INFORMATION BELOW)

***PERSONAL***

**NAME:**\_\_\_\_\_

LAST                                      FIRST                                      MIDDLE

**PRESENT ADDRESS:**\_\_\_\_\_

NO.                      STREET                      CITY                      STATE                      ZIP

**SOCIAL SECURITY NUMBER:**\_\_\_\_\_ **TELEPHONE NO:**\_\_\_\_\_

**ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.A.?** \_\_\_\_\_  
(IF YES, VERIFICATION WILL BE REQUIRED)

**ARE YOU OF THE LEGAL AGE TO WORK?** \_\_\_\_\_

**POSITION (S) APPLIED FOR:** \_\_\_\_\_

**WERE YOU PREVIOUSLY EMPLOYED BY US?** \_\_\_\_\_ **IF YES, WHEN?** \_\_\_\_\_

**IF SELECTED FOR THIS POSITION, WHEN WOULD YOU BE AVAILABLE TO BEGIN WORK?** \_\_\_\_\_

**DO YOU HAVE ANY EXPERIENCES, SKILLS OR QUALIFICATIONS WHICH WOULD BE BENEFICIAL IN THE JOB FOR WHICH YOU ARE APPLYING?** (APPLICANT SHOULD NOT LIST ANY INFORMATION THAT FEDERAL AND/OR STATE LAW PRECLUDES OBTAINING IN THE PRE-EMPLOYMENT STAGE.) \_\_\_\_\_  
\_\_\_\_\_

**ARE YOU ELIGIBLE TO BE BONDED?** \_\_\_\_\_

**HAVE YOU RECEIVED ANY MILITARY TRAINING THAT MAY BE PERTINENT TO THE JOB YOU ARE APPLYING FOR? IF SO PLEASE EXPLAIN:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVEN BEEN CONVICTED OF A CRIME, EXCLUDING MISDEMEANORS AND SUMMARY OFFENSES WHICH HAS NOT BEEN ANNULLED OR EXPUNGED OR SEALED BY A COURT? \_\_\_\_\_ IF YES, DESCRIBE IN FULL: \_\_\_\_\_

*NOTE: CONVICTION OF A MISDEMEANOR OR LESSER CRIME WILL NOT BE AN ABSOLUTE BAR TO EMPLOYMENT*

HAVE YOU RECEIVED A COPY OF THE JOB DESCRIPTION FOR THE JOB YOU ARE APPLYING? YES \_\_\_\_\_ NO \_\_\_\_\_

CAN YOU PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB AS LISTED ON THE JOB DESCRIPTION WITH OR WITHOUT REASONABLE ACCOMMODATION?  
YES \_\_\_\_\_ NO \_\_\_\_\_

IF YOU ARE UNABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB, PLEASE LIST WHICH FUNCTIONS YOU ARE UNABLE TO PERFORM AND LIST WHAT ACCOMMODATIONS ARE NEEDED TO HELP YOU PERFORM THE DUTIES:

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## EDUCATIONAL HISTORY

SCHOOL	NAME/ADDRESS	COURSE OF STUDY	LAST YEAR COMPLETED				DID YOU GRADUATE? IF SO, WHAT DEGREE
PRIMARY	_____		5	6	7	8	
HIGH	_____		1	2	3	4	
COLLEGE	_____		1	2	3	4	
OTHER	_____		1	2	3	4	

**LIST BELOW PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT**

**I.**

PREVIOUS EMPLOYER	FROM		TO		STARTING SALARY / WEEKLY	ENDING SALARY PER WEEK	NAME / POSITION OF SUPERVISOR
	MO	YEAR	MO	YEAR			
TELEPHONE NO. AND ADDRESS:	CAN WE CONTACT YOUR EMPLOYER?		REASON FOR LEAVING?				

DESCRIBE DUTIES PERFORMED:

**II.**

PREVIOUS EMPLOYER	FROM		TO		STARTING SALARY / WEEKLY	ENDING SALARY PER WEEK	NAME / POSITION OF SUPERVISOR
	MO	YEAR	MO	YEAR			
TELEPHONE NO. AND ADDRESS:	CAN WE CONTACT YOUR EMPLOYER?		REASON FOR LEAVING?				

DESCRIBE DUTIES PERFORMED:

**III.**

PREVIOUS EMPLOYER	FROM		TO		STARTING SALARY / WEEKLY	ENDING SALARY PER WEEK	NAME / POSITION OF SUPERVISOR
	MO	YEAR	MO	YEAR			
TELEPHONE NO. AND ADDRESS:	CAN WE CONTACT YOUR EMPLOYER?		REASON FOR LEAVING?				

DESCRIBE DUTIES PERFORMED:

**EMPLOYMENT HISTORY CONTINUED**

IV.

PREVIOUS EMPLOYER	FROM		TO		STARTING SALARY / WEEKLY	ENDING SALARY PER WEEK	NAME / POSITION OF SUPERVISOR
	MO	YEAR	MO	YEAR			
TELEPHONE NO. AND ADDRESS:	CAN WE CONTACT YOUR EMPLOYER?		REASON FOR LEAVING?				

DESCRIBE DUTIES PERFORMED:

NOTE: IF THERE IS A PARTICULAR EMPLOYER(S) YOU DO NOT WISH US TO CONTACT, PLEASE LIST BELOW:

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**PERSONAL REFERENCES**

NAME AND OCCUPATION	ADDRESS	PHONE NUMBER

THE FACTS SET FORTH IN MY APPLICATION FOR EMPLOYMENT ARE TRUE AND COMPLETE. I UNDERSTAND THAT IF EMPLOYED, ANY FALSE STATEMENT ON THIS APPLICATION MAY RESULT IN MY DISMISSAL. I FURTHER UNDERSTAND THAT THIS APPLICATION IS NOT INTENDED TO BE A CONTRACT OF EMPLOYMENT, NOR DOES THIS APPLICATION OBLIGATE THE EMPLOYER IN ANY WAY IF THE EMPLOYER DECIDES TO EMPLOY ME. I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS AT-WILL AND CAN BE TERMINATED BY EITHER PARTY WITH OR WITHOUT NOTICE, AT ANY TIME, FOR ANY REASON OR NO REASON. NO ONE OTHER THAN AN OFFICER OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING AND THEN ONLY IN A WRITING SIGNED BY AN OFFICER FOR THE CITY OF MURRAY.

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SIGNATURE OF APPLICANT

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DATE

THE CITY OF MURRAY, KENTUCKY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, SEX, RELIGION, NATIONAL ORIGIN, AGE, DISABILITY OR VETERAN STATUS IN THE PROVISION OF SERVICES, IN PROGRAMS OR ACTIVITIES, OR EMPLOYMENT OPPORTUNITIES AND BENEFITS.

CITY OF MURRAY

AUTHORIZATION FOR RELEASE OF INFORMATION

I, \_\_\_\_\_ hereby authorize the City of Murray to obtain any information which the department deems necessary from federal, state, and local government agencies, previous employers, educational institutions, credit bureaus, financial institutions, medical institutions, law enforcement agencies and such other institutions and individuals to help determine employment eligibility.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE INFORMATION

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
State of Drivers License & Number

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
SSN#

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date